UAMU CANDIDA IES-SUBMIT 1 ORIGINAL AND 1 COPY NEIGHBOR ISLAND CANDIDATES-SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT **CANDIDATE COMMITTEE**



PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLET

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE: SECTION II-TYPE OF PEROPT.				
(a) Candidate Name:	>-	SECTION II-TYPE OF REPORT:		
_	(See t	(See the Schedule of Reporting Dates to complete this section)		
Steven Fox	1st P	1st Preliminary Primary Amended First Third Second Fourth		
(b) Committee Name: Friends of Steven Fox	. 2nd f	2nd Preliminary Primary Short Form 1		
(c) Mailing Address: Po Box3		Primary	•••••••	•
Holuplon, Hi 96725-0003 (d) Phone (Bus) 808-329-4813 (Res) 808-329-222		ninary General		REPORTING DEDICE
(d) Phone (Bus) 808-329-48/3 (Res) 608-329-223	Final	REPORTING PERIO		
Treasurer's	1 (Supplemental 9/4		through 9/15/34
	Cuppi	emerital		
SECTION III-SUMMARY O (Complete Section IV on the Back	SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS (Complete Section IV on the Back of this Form Before Completing This Section)			
		COLUM	I A	COLUMN B
		TOTAL THIS	PERIOD	ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period.	***************			OTAL TO DATE
2. Cash on Hand at the Beginning of this Reporting Period	****************	9286	79	2
3. Total Receipts (From Line 15)	************************	l l	04	38, 376 ⁰⁴ 3
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Co.	lumn B)	21,002	83	
5. Total Disbursements (not including Unpaid Expenditures) (From Line	19)	17 201		38,376 04 ⁴ 25,600 ² / ₅ 12,775 ⁸³ / ₆
Cash on Hand at the Closing of this Reporting Period (Subtract Line	5 from Line 4)	12,775	83	12,775 83 6
Total Loans at the Closing of this Reporting Period	******************	25000	<u>oc</u>	7
Total Unpaid Expenditures at the Closing of this Reporting Period	***********	&		8
Debts Owed at the Closing of this Reporting Period (Add Lines 7 and	8)	25000	e.,	9
3. Surplus/Deficit (Subtract Line 9 from Line 6)		(1) 2241	7)	10
nereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.				
				,
Stemm 107-04	m.	1. Th	\int	
ndidate Signature Date	Treasurer Sign	ature	10-00	10-8-0\$

Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II of this Disclosure Report.

In Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS (if Necessary, Complete Schedules A through E Before Completing This Section)

COLUMN A

ELECTION PERIOD

COLUMN B

RECEIPTS TOTAL THIS PERIOD TOTAL TO DATE 11. Contributions From: (a) Individuals/Other Entities/Noncandidate Committees/Political Parties 11/3 Monetary and Non-Monetary Contributions of \$100 or Less..... 11.a Monetary and Non-Monetary Contributions of More Than \$100..... 11/a (iii) Subtotal (Add Lines 11(a)(ii) and 11(a)(ii))..... 11(a) (b) Candidate or Candidate's Immediate Family 11|6 Monetary and Non-Monetary Contributions of \$100 or Less..... 11(6 Monetary and Non-Monetary Contributions of More Than \$100..... 14(6 7000 (iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii))..... 11(6 025 12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)..... 12 376 13. Public Funds and Other Receipts..... 13 14. Loans.... 14 5000 15 15. Total Receipts (Add Lines 12 through 14)..... **DISBURSEMENTS** 16. Expenditures..... 25 600 21 17 17. Loans Repaid or Forgiven..... 18. Unpaid Expenditures Paid or Forgiven..... 18 19. Subtotal Disbursements (Add Lines 16 through 18)..... 2560021 19 20. Unpaid Expenditures..... 20 21. Total Disbursements (Add Lines 19 and 20)..... 2560021 00 21 14287

	CHECK ONLY ONE BOX
	USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOY
47	
STREET, SQUARE,	MDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES
1	COMMUNITIES PARTIES

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION



SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

Steve		PAGE	7 OF	
FRIEN	rds of Steven Fox	API-O-THE		
DATE OF DEPOSIT OR RECEIPT OF	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE	
NON-MONETARY CONTRIBUTION	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION	OF NON-MONETARY CONTRIBUTION THIS PERIOD	ELECTION PERIOD
8/31	NON-MONETARY CONTRIBUTION— Hi Community Federal CRUH PO Bix 747 Keala Kekua, Hi 90750 (Statement Not Recounted After %)	Dividend/Indexed	.04	TOTAL TO DATE
8/3,	NON-MONETARY CONTRIBUTION Refure A theck (See Above)		(25°05)	(2500)
9/4	Oprition Denter by trons of 160 en less		25/20	257 2
9/2	ONHER CONTRIBUTION CONTRIBUTION Set \$180 00 1258		25-05	25-50
	NON-MONETARY CONTRIBUTION			
	NON-MONETARY CONTRIBUTION			
The second secon				
. SUBTOTAL OF	MONETARY AND NON-MONETARY CONTRIBUTIONS THE	S PERIOD (This Page)	25-104	
. TOTAL MONE the applicable	TARY AND NON-MONETARY CONTRIBUTIONS THIS PERIO Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii))	D (Last Page Only) (Transfer total	25/04 25/04	

 CHECK ONLY ONE BOX USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELO
INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES
CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE. CANDIDATE AND CANDIDATE COMMITTEE NAME: STEVEN FOX FRIENDS of Steven PAGE DATE OF FOR AGGREGATES OF \$1,000 OR MORE FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR AMOUNT OF DEPOSIT OR CONTRIBUTION OR RECEIPT OF NAME OF EMPLOYER FAIR MARKET VALUE NON-MONETARY OF NON-MONETARY CONTRIBUTION AGGREGATE IF A DEPENDENT MINOR, ENTER NAME OF PARENT CONTRIBUTION ELECTION PERIOD OCCUPATION THIS PERIOD NON-MONETARY CONTRIBUTION TOTAL TO DATE JOCIAL WORKER Health East 500° 500° NON-MONETARY CONTRIBUTION Tom Blackburn
15-5572 Kona Bay Der24 Psychologist
Naihur-Kona, H196740 2000€ NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION 1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page)..... 2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii))....

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on

	CHECK ONLY ONE BOX
26	USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELO
	INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES
	CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE. CANDIDATE AND CANDIDATE COMMITTEE NAME: PAGE FOR AGGREGATES OF \$1,000 OR MORE DATE OF FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF DONOR AMOUNT OF DEPOSIT OR RECEIPT OF CONTRIBUTION OR NAME OF EMPLOYER FAIR MARKET VALUE NON-MONETARY OF NON-MONETARY AGGREGATE CONTRIBUTION CONTRIBUTION IF A DEPENDENT MINOR, ENTER NAME OF PARENT ELECTION PERIOD OCCUPATION THIS PERIOD TOTAL TO DATE NON-MONETARY CONTRIBUTION Steve A Fox Candidate 10250 NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION 1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page)..... 2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

Form CC-5(A) (Rev. 5/99)

ATTACH A COPY OF THE EXECUTED LOAN DOCUMENT AT THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE D LOANS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE. CANDIDATE AND CANDIDATE COMMITTEE NAME: PAGE Steven Fox FRIENds of FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF LENDER LOAN SOURCE NAME OF EMPLOYER AND OCCUPATION AMOUNT OF AMOUNT OF LOAN AT NEW LOAN AMOUNT REPAID LOAN AT BEGINNING OF AMOUNT OR FORGIVEN DATE OF LOAN CLOSING OF PURPOSE OF LOAN THIS PERIOD THIS PERIOD THIS PERIOD THIS PERIOD Steven Fox POBOX 5374 KAILUA-KONA, 14196745-5374 FORGIVEN CANDIDATE HAMEDIATE FAMILY #10000 # 15HOF 6-2500 ANANCIAL INSTITUTION OTHER Retired FORGIVEN CANDIDATE MMEDIATE FAMILY FINANCIAL INSTITUTION П отнев FORGIVEN CANDIDATE MAMEDIATE FAMILY FINANCIAL INSTITUTION C OTHER FORGIVEN CANDIDATE MMEDIATE FAMILY FINANCIAL INSTITUTION OTHER FORGIVEN CANDIDATE MMEDIATE FAMILY FINANCIAL INSTITUTION OTHER 1. SUBTOTAL (This Page).... \$25tm \$1500 2. TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report)..... 3. TOTAL LOANS REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report)..... 4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report)....

Form CC-5(D) (Rev. 5/99)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

CAMPAIGN SPENDING COMMISSION

SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE

1000	ND CANDIDATE COMMITTEE NAME: N FOX N Steven Fox	PAGE /	OF 2
7776	THAS OF OFENEN POX		
DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
8/31	MON-MONETARY CONTRIBUTION Hawaii Federal Community Callor HO Box 747 Keslakekus, HP 96750	BANK Chq Retck	1000
9/4	NON-MONETARY CONTRIBUTION Kond PRINTING - Epaphics PO Box 228 Kajlua-Kond, 4196745	WALKING PIECE	1052 03
9/4	Non-MONETARY CONTRIBUTION Kond PRINTING & CRAPKICS Above	Mailing Ched	473127
9/9	MON-MONETARY CONTRIBUTION HASLIS A TELESTAL JOURNA! PO BOX 747 NEALAKEKU2, 14194750 NON-MONETARY CONTRIBUTION	advething	65832
9/1	West HAMAII laday POBOX 789 KAILUA-Kona, Hi 96745	adverticing	53572
9/9	HAMAI, County Dernouphtic PANTY	other Committee	757°E
9/12	NON-MONETARY CONTRIBUTION Pay Pay	BANK CM.	206
	EXPENDITURES THIS PERIOD (This Page)		7739 38

Form CC-5(B) (Rev. 5/99

CAMPAIGN SPENDING COMMISSION

SCHEDULE B EXPENDITURES CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OF FOR ANY COMMERCIAL PURPOSE.

- N-011/2/1	o CANDIDATE COMMITTEE NAME: FOX Steven Fox	PAGE 2 OF	2
DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9/14	Mail IT POBOX 4085 Hilo, Hi96720	Postage	3598 32
9/15	Non-MONETARY CONTRIBUTION Kons PRINTING PO Box 220 HAILUA - Kona, Hi96745-0220	Printing	233/₹
9/16	NON-MONETARY CONTRIBUTION CONTRAL HACIFIC BANK	BANK Chy.	1335
9/16	NON-MONETARY CONTRIBUTION West Howaii Today Above	Advertising	60559
	NON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		
	NON-MONETARY CONTRIBUTION		
1. SUBTOTAL O		654762 1428700	
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report)			1428700 orm CC-5(B) (Rev. 5/99